

AMENDED IN SENATE JUNE 25, 1998
AMENDED IN ASSEMBLY MAY 22, 1998
AMENDED IN ASSEMBLY APRIL 27, 1998

CALIFORNIA LEGISLATURE—1997–98 REGULAR SESSION

ASSEMBLY BILL

No. 2746

Introduced by Assembly Member Aroner

February 23, 1998

An act to amend Section ~~14684~~ of, and to add Section ~~14687~~ to, 1262 of the Health and Safety Code, and to amend Sections 5768.5 and 14684 of the Welfare and Institutions Code, relating to mental health.

LEGISLATIVE COUNSEL'S DIGEST

AB 2746, as amended, Aroner. ~~Medi-Cal mental~~ Mental health services.

Existing law requires designated health facilities, mental health rehabilitation centers, and programs to provide a written aftercare plan prior to the discharge of a mental health patient from their facilities.

This bill would define mental health patient for purposes of these provisions.

~~Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Services, pursuant to which medical benefits, including mental health benefits, are provided to public assistance recipients and certain other low-income persons. Existing law provides for~~

~~the provision of Medi-Cal services through managed care contracts.~~

~~This bill would require the State Department of Mental Health to establish a Medi-Cal mental health managed care ombudsman program.~~

Existing law requires each mental health plan to include a mechanism for monitoring the effectiveness of, and evaluating the accessibility and quality of, services available, and requires the plan to utilize, and be based upon, state-adopted performance outcome measures ~~that~~ *and* include a beneficiary satisfaction component and a grievance system for beneficiaries and providers.

~~This bill would instead require each mental health plan to include a mechanism for monitoring the effectiveness of, and evaluating the accessibility of, services available, and would require state-adopted outcome measures~~ *the mental health plan* also to include review of individual service plan procedures and practices.

Vote: majority. Appropriation: no. Fiscal committee: ~~yes~~ *no*. State-mandated local program: no.

The people of the State of California do enact as follows:

1 ~~SECTION 1. Section 14684 of the Welfare and~~
2 ~~SECTION 1. Section 1262 of the Health and Safety~~
3 ~~Code is amended to read:~~

4 1262. (a) When a mental health patient is being
5 discharged from one of the facilities specified in
6 subdivision (c), the patient and the patient's conservator,
7 guardian, or other legally authorized representative shall
8 be given a written aftercare plan prior to the patient's
9 discharge from the facility. The written aftercare plan
10 shall include, to the extent known, all of the following
11 components:

12 (1) The nature of the illness and followup required.
13 (2) Medications including side effects and dosage
14 schedules. If the patient was given an informed consent
15 form with his or her medications, the form shall satisfy the
16 requirement for information on side effects of the
17 medications.



(3) Expected course of recovery.

(4) Recommendations regarding treatment that are relevant to the patient's care.

(5) Referrals to providers of medical and mental health services.

(6) Other relevant information.

(b) The patient shall be advised by facility personnel that he or she may designate another person to receive a copy of the aftercare plan. A copy of the aftercare plan shall be given to any person designated by the patient.

(c) Subdivision (a) applies to all of the following facilities:

(1) A state mental hospital.

(2) A general acute care hospital as described in subdivision (a) of Section 1250.

(3) An acute psychiatric hospital as described in subdivision (b) of Section 1250.

(4) A psychiatric health facility as described in Section 1250.2.

(5) A mental health rehabilitation center as described in Section 5675 of the Welfare and Institutions Code.

(6) A skilled nursing facility with a special treatment program, as described in Section 51335 and Sections 72443 to 72475, inclusive, of Title 22 of the California Code of Regulations.

(d) For purposes of this section, "mental health patient" means a person who is admitted to the facility primarily for the diagnosis or treatment of a mental disorder.

SEC. 2. Section 5768.5 of the Welfare and Institutions Code is amended to read:

5768.5. (a) When a mental health patient is being discharged from any facility authorized under Section 5675 or 5768, the patient and the patient's conservator, guardian, or other legally authorized representative shall be given a written aftercare plan prior to the patient's discharge from the facility. The written aftercare plan shall include, to the extent known, the following components:

(1) The nature of the illness and followup required.

1 (2) Medications including side effects dosage
2 schedules. If the patient was given an informed consent
3 form with his or her medications, the form shall satisfy the
4 requirement for information on side effects of the
5 medications.

6 (3) Expected course of recovery.

7 (4) Recommendations regarding treatment that are
8 relevant to the patient's care.

9 (5) Referrals to providers of medical and mental
10 health services.

11 (6) Other relevant information.

12 (b) The patient shall be advised by facility personnel
13 that he or she may designate another person to receive a
14 copy of the aftercare plan. A copy of the aftercare plan
15 shall be given to any person designated by the patient.

16 (c) *For purposes of this section, "mental health*
17 *patient" means a person who is admitted to the facility*
18 *primarily for the diagnosis or treatment of a mental*
19 *disorder.*

20 *SEC. 3. Section 14684 of the Welfare and Institutions*
21 *Code is amended to read:*

22 14684. Notwithstanding any other provision of state
23 law, and to the extent permitted by federal law, mental
24 health plans, whether administered by public or private
25 entities, shall be governed by the following guidelines:

26 (a) State and federal Medi-Cal funds identified for the
27 diagnosis and treatment of mental disorders shall be used
28 solely for those purposes. Administrative costs shall be
29 clearly identified and shall be limited to reasonable
30 amounts in relation to the scope of services and the total
31 funds available. Administrative requirements shall not
32 impose costs exceeding funds available for that purpose.

33 (b) The development of the mental health plan shall
34 include a public planning process that includes a
35 significant role for Medi-Cal beneficiaries, family
36 members, mental health advocates, providers, and public
37 and private contract agencies.

38 (c) The mental health plan shall include appropriate
39 standards relating to quality, access, and coordination of
40 services within a managed system of care, and costs

1 established under the plan, and shall provide
2 opportunities for existing Medi-Cal providers to continue
3 to provide services under the mental health plan, as long
4 as the providers meet those standards.

5 (d) Continuity of care for current recipients of
6 services shall be ensured in the transition to managed
7 mental health care.

8 (e) Medi-Cal covered mental health services shall be
9 provided in the beneficiary's home community, or as
10 close as possible to the beneficiary's home community.
11 Pursuant to the objectives of the rehabilitation option
12 described in subdivision (a) of Section 14021.4, mental
13 health services may be provided in a facility, a home, or
14 other community-based site.

15 (f) Medi-Cal beneficiaries whose mental or emotional
16 condition results or has resulted in functional
17 impairment, as defined by the department, shall be
18 eligible for covered mental health services. Emphasis
19 shall be placed on adults with serious and persistent
20 mental illness and children with serious emotional
21 disturbances, as defined by the department.

22 (g) Each mental health plan shall include a
23 mechanism for monitoring the effectiveness of, and
24 evaluating accessibility and quality of, services available.
25 The plan shall utilize and be based upon state-adopted
26 performance outcome measures and shall include *review*
27 *of individual service plan procedures and practices*, a
28 beneficiary satisfaction component, and a grievance
29 system for beneficiaries and providers.

30 (h) Each mental health plan shall provide for
31 culturally competent and age-appropriate services, to the
32 extent feasible. The mental health plan shall assess the
33 cultural competency needs of the program. The mental
34 health plan shall include, as part of the quality assurance
35 program required by Section 4070, a process to
36 accommodate the significant needs with reasonable
37 timeliness. The department shall provide demographic
38 data and technical assistance. Performance outcome
39 measures shall include a reliable method of measuring

1 and reporting the extent to which services are culturally
2 competent and age-appropriate.

3 ~~Institutions Code is amended to read:~~

4 ~~14684. Notwithstanding any other provision of state~~
5 ~~law, and to the extent permitted by federal law, mental~~
6 ~~health plans, whether administered by public or private~~
7 ~~entities, shall be governed by the following guidelines:~~

8 ~~(a) State and federal Medi-Cal funds identified for the~~
9 ~~diagnosis and treatment of mental disorders shall be used~~
10 ~~solely for those purposes. Administrative costs shall be~~
11 ~~clearly identified and shall be limited to reasonable~~
12 ~~amounts in relation to the scope of services and the total~~
13 ~~funds available. Administrative requirements shall not~~
14 ~~impose costs exceeding funds available for that purpose.~~

15 ~~(b) The development of the mental health plan shall~~
16 ~~include a public planning process that includes a~~
17 ~~significant role for Medi-Cal beneficiaries, family~~
18 ~~members, mental health advocates, providers, and public~~
19 ~~and private contract agencies.~~

20 ~~(c) The mental health plan shall include appropriate~~
21 ~~standards relating to quality, access, and coordination of~~
22 ~~services within a managed system of care, and costs~~
23 ~~established under the plan, and shall provide~~
24 ~~opportunities for existing Medi-Cal providers to continue~~
25 ~~to provide services under the mental health plan, as long~~
26 ~~as the providers meet those standards.~~

27 ~~(d) Continuity of care for current recipients of~~
28 ~~services shall be ensured in the transition to managed~~
29 ~~mental health care.~~

30 ~~(e) Medi-Cal covered mental health services shall be~~
31 ~~provided in the beneficiary's home community, or as~~
32 ~~close as possible to the beneficiary's home community.~~
33 ~~Pursuant to the objectives of the rehabilitation option~~
34 ~~described in subdivision (a) of Section 14021.4, mental~~
35 ~~health services may be provided in a facility, a home, or~~
36 ~~other community-based site.~~

37 ~~(f) Medi-Cal beneficiaries whose mental or emotional~~
38 ~~condition results or has resulted in functional~~
39 ~~impairment, as defined by the department, shall be~~
40 ~~eligible for covered mental health services. Emphasis~~

1 shall be placed on adults with serious and persistent
2 mental illness and children with serious emotional
3 disturbances, as defined by the department.

4 (g) Each mental health plan shall include a
5 mechanism for monitoring the effectiveness of, and
6 evaluating the accessibility of, services available. The
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9 of individual service plan procedures and practices, a
10 beneficiary satisfaction component, and a grievance
11 system for beneficiaries and providers.

12 (h) Each mental health plan shall provide for
13 culturally competent and age-appropriate services, to the
14 extent feasible. The mental health plan shall assess the
15 cultural competency needs of the program. The mental
16 health plan shall include, as part of the quality assurance
17 program required by Section 4070, a process to
18 accommodate the significant needs with reasonable
19 timeliness. The department shall provide demographic
20 data and technical assistance. Performance outcome
21 measures shall include a reliable method of measuring
22 and reporting the extent to which services are culturally
23 competent and age-appropriate.

24 SEC. 2. Section 14687 is added to the Welfare and
25 Institutions Code, to read:

26 14687. In order ensure a statewide system of outreach,
27 education, and assistance to people who may be eligible
28 to receive Medi-Cal covered mental health services
29 consistent with federal and state law, the State
30 Department of Mental Health shall establish a Medi-Cal
31 mental health managed care ombudsman program.